W	ork	Orde	r ID	61515
* *		Oluc		ULULU

Monday, August 30, 2010 9:17:42 AM



Page 1

Item ID:

D3823-3KIV

Accept

Setup Start



Revision ID:

Item Name:

Overhead Rear, Center-Ivory

Start Date:

Required Date: 9/6/2010

8/30/2010

Start Qty: 1.00

Rea'd Otv: 1.00



Cust Item ID:

Customer:

Reference:

Approvals:

QC:

Date: 10-8-30 Tooling:

SPC (Y/N):

Date:

Date:

Run

Start

Stop

Stop



Sequence ID/ **Work Center ID**

Operation Description

Date:

Set Up/ Run Hours Tool ID

Tool # Plan Code

Accept Oty

Reject Reject Otv Number

Insp. Stamp

Draw Nbr

Revision Nbr

100

leu C

0.00

HandThermo

Memo

0.00

105

Hand Finishing Thermoforming

Hand Finishing Thermoforming

HandThermo

Dry Material

Memo

Dry Sheet as per QSI022 KYDEX

1-Cut Sheet to required Blank size

Temp:

Time IN:

0.00

0.00

Dart A	erosp	pace	Ltd
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w/o:6	1515	WORK ORDER CHANGES									
DATE	STEP	Penn. Jany. PROCEDURE CHANGE	Ву	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector				
10/10/13	# 100	ADD in an correct information in heart bux	di	wholy			5				

Part No: <u>D3823-3 KIV</u> PAR #:	Fault Category:	NCR: Yes No DQA:	Date:
Resolution:	Disposition:	QA: N/C Closed:	Date:

NCR:		WORK ORDER NON-CONFORMANCE (NCR)									
DATE	0750	Description of NC		Corrective Action Section B		Verification	Approval Chief Eng	Approval QC Inspector			
DATE	STEP	Section A	Initial Chief Eng	Action Description Chief Eng	Sign & Date	Section C					
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NOTE											

Work Order ID 61515

Monday, August 30, 2010 9:17:42 AM



Page 2

Item ID:

D3823-3KIV

Accept



Setup Start

Stop



Revision ID:

Item Name

Overhead Rear, Center-Ivory

Start Date:

8/30/2010

Start Otv: 1.00

Operation

Description

Required Date: 9/6/2010

Req'd Oty: 1.00



Cust Item ID: Customer:

Reference:

Approvals:

Process Plan: Date: Tooling:

Date: ____

SPC (Y/N):

Set Up/

Run Hours

Date:

Tool ID

Date:

Tool # Plan

Code

Run

Accept

Qty

Start

Stop

Reject

Number

Reject

Qty



Insp.

Stamp

Sequence ID/

Work Center ID

110

Thermoform

Memo

0.00

0.00

Thermoforming Machine

1-Machine Set-Up

2-Pre-heat Tool to required temp.

3-Thermoform as per Dwg and Folio #FTA032using tool DT9110

Dwg Rev: Folio Rev.

120

Quality Control

OC2- Inspect parts off machine FAI/FAIB

0.00

Memo

0.00

Visually inspect part for proper formation and texture

130

Quality Control

QC8- Inspect parts - second check

0.00

Memo

0.00

Dart Aerospace Lt

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W/O:	V/O:			WORK ORDER CHANGES								
DATE	STEP	PR	OCEDURE CHA	NGE	Ву	Date Q	ty Approval Chief Eng / Prod Mgr	Approval QC Inspector				
Part No						No DQA: Date:						
	Resolution: Disposition:						Date: _					
NCR:			WORK ORDI	ER NON-CONFORM	ANCE (NCF	(1)						
DATE	STEP	Description of NC		Corrective Action Section B Initial Action Description			ion Approval	Approval				
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Work	Ord	er ID	61	515
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Monday, August 30, 2010 9:17:42 AM



Page 3

Item ID:

D3823-3KIV

Accept



Setup Start

Stop



Revision ID:

Item Name:

Overhead Rear, Center-Ivory

Start Date:

8/30/2010

Start Otv: 1.00

Required Date: 9/6/2010 Req'd Oty: 1.00



Cust Item ID:

Customer:

Reference:

Approvals:

Process Plan: Date: Tooling:

SPC (Y/N):

Date:

Date:

Start Run

Stop



Sequence ID/

Work Center ID

140

HandThermo

Hand Finishing Thermoforming

Operation

Description

QC: Date:

Set Up/ **Run Hours**

0.00

0.00

Memo 1-Trim to finished dimensions as per Dwg Tool ID

Tool # Plan Code

Accept **Qty**

Reiect Oty

Reject Insp. Number Stamp

150

QC

Quality Control

QC2- Inspect parts off machine FAI/FAIB

Memo

Memo

0.00

0.00

Complete FAI document

160

Quality Control

QC5- Inspect part completeness to step on W/O

W/O:			WC	RK ORDER CHANGE	S				
DATE	STEP	PRO	OCEDURE CHAI	NGE	Ву	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector
Part No	Part No: PAR #: _		Fault Cate	jory:	NCR: Yes	No DQ	A :	_ Date: _	
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Work Order ID 61515

Monday, August 30, 2010 9:17:42 AM



Page 4

Item ID:

D3823-3KIV

Accept

Setup Start

Stop



Revision ID:

Item Name: Overhead Rear, Center-Ivory

Start Date:

8/30/2010

QC:

Start Qty: 1.00

Req'd Qty: 1.00



Cust Item ID: Customer:

Tool ID

Reference:

Required Date: 9/6/2010

Approvals:

Process Pian: _____

Date:

Date:

Tooling:

SPC (Y/N):

Date: Date:

Tool # Plan

Code

Start Run

Stop

Reject

Qty

Accept

Qty

Insp.

Stamp

Sequence ID/

Work Center ID

170

180

Packaging Packaging

Operation Description

Identify as per dwg & Stock Location:____

Set Up/ **Run Hours**

0.00

0.00

Memo

QC21- Final Inspection - Work Order Release

0.00

QC

Quality Control

Memo

0.00

Reject

Number

W/O:		WORK ORDER CHANGES										
DATE	STEP	PR	OCEDURE CHA	NGE	Ву	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector			
												
Part No	Part No: PAR #:		Fault Cate	gory:	NCR: Yes No DQA: Date:							
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NCR:			WORK ORD	ER NON-CONFORM	ANCE (NCF	R)						
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DATE	Section A	Initial Chief Eng	Action Description Chief Eng	Sign 8 Date	Verifica Section		Chief Eng	QC Inspector				
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1.00							·					
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Picklist Print

Monday, August 30, 2010 9:17:46 AM

Work Order ID: 61515

Parent Item:

D3823-3KIV

Parent Item Name:

Overhead Rear, Center-Ivory



Start Date: 8/30/2010

Required Date: 9/6/2010

Start Oty: 1.00

Loc Code

Required Oty: 1.00

Comments:

IPP RevA: New issue DD verified by:EC

Add Step 105 Dry Material 110/04/21 DL

Ipp Rev. B

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Primar Item Locatio	•	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MKYD6185S.080-P3- 62015		Purchased	No		100	sf	588.8500	10.625	10.625			



6185 KYDEX .080"

Location Loc Qty
therm 588.85
109703 588.85

B10/10/07

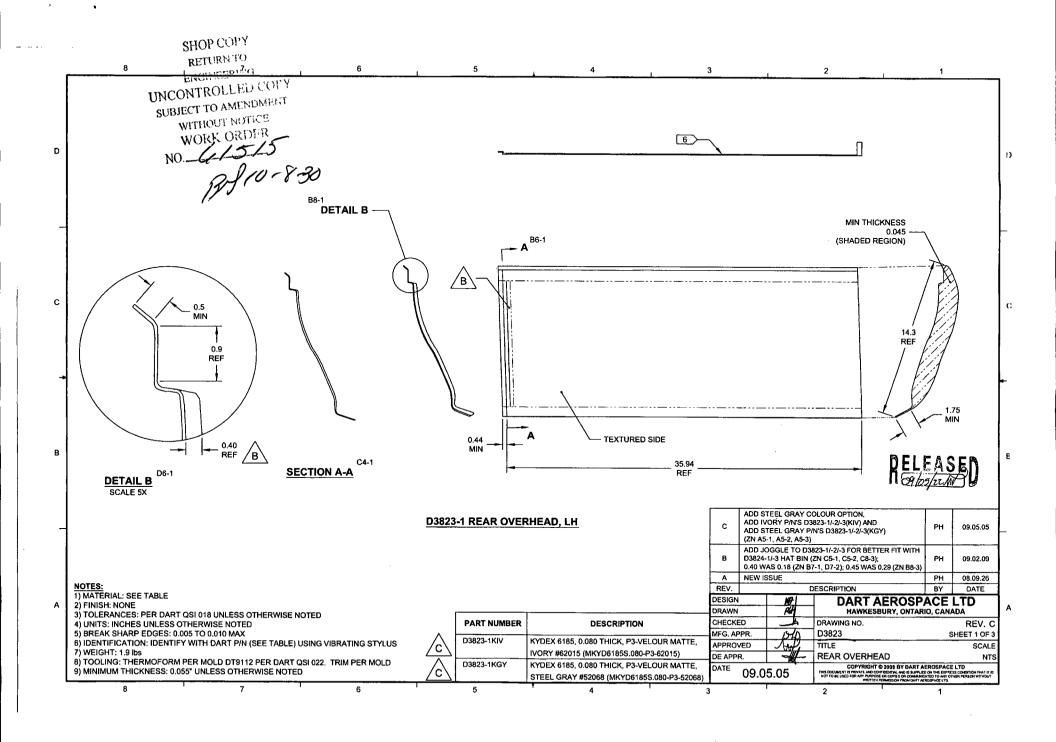
Page 1

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Description: Rear	Overhead, Center			Pa	rt Number:	D3823-3KIV/KGY				
Inspection Dwg: D	3823 Rev: C					Page 1 of 1				
	FIRST A	RTICLE INSP	ECTION	CHECK	LIST					
	x	First Article		Prototy						
					,					
THERMOFORMING SECTION										
Description			Accept	Reject	Method of Inspection	Comments				
Inside Radii less tha	an"			ļ						
Shape Definition										
Texture Retention	na ayah aa humna	arceke voide								
Material imperfectio scratching	ns such as bumps,	Cracks, voids,								
Measured by:	M	,			Date:	10/10/07				
		TRIMMING	SECTIO	N						
Drawing		Actual	_		Method of					
Dimension	Tolerance	Dimension	Accept	Reject	Inspection	Comments				
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0.75	Min	0.755"								
0.36	Min	042"								
0.50	Min	0,568								
0.045	Min	0.451.		· · · · · ·						
0.055	Min	0.856"								
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	y: S			[Date:	10/10/13				
Audited b	y: S			[N/A				

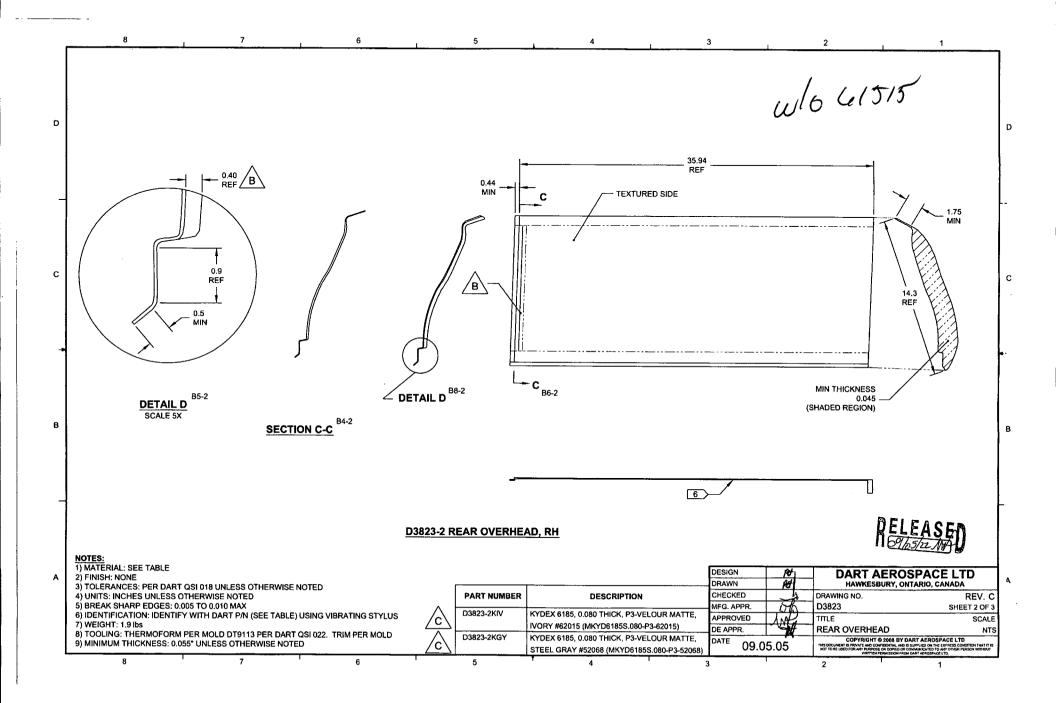
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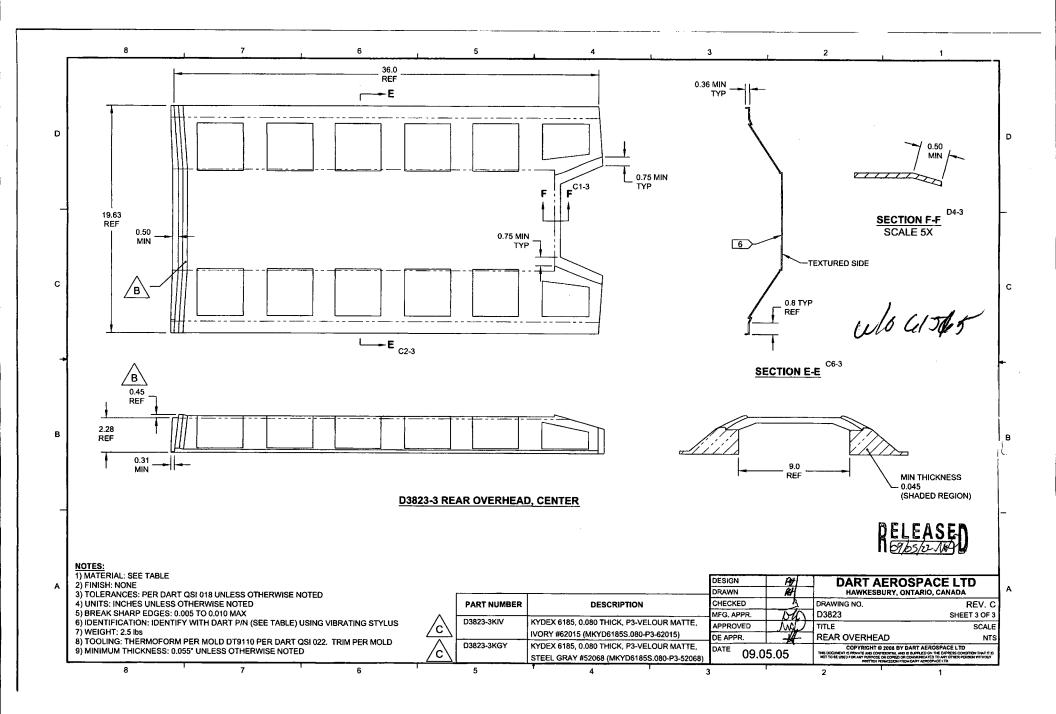


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